Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
yo pid ex lic Br ide	Write the name that is on your government-issued picture identification (for	Roxana First name	First name
	example, your driver's license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Martinez Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5216	

Deb	otor 1 Roxana Martinez		Case number (if known)			
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		336 3rd Street Lindenhurst, NY 11757				
Nu		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Suffolk				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Del	otor 1 Roxana Martinez					Case number (if known)	
Par	Tell the Court About	our Bank	ruptcy Ca	ise			
7. The chapter of the Bankruptcy Code you are					each, see <i>Notice Required by</i> ge 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for e box.	r Bankruptcy
	choosing to file under	■ Chapt	er 7				
		☐ Chapt	er 11				
		☐ Chapt	er 12				
		☐ Chapt	er 13				
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local cour about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit capre-printed address.					heck, or money		
		☐ I ne	ed to pay	y the fee in installnee in Installments (O	nents. If you choose this optic	on, sign and attach the Application for Indiv	iduals to Pay
		☐ I re	quest tha	nt my fee be waived	d (You may request this option	n only if you are filing for Chapter 7. By law ur income is less than 150% of the official	v, a judge may,
		арр	lies to you	ur family size and yo	ou are unable to pay the fee ir	n installments). If you choose this option, you choose this option, you file it with your petition	ou must fill out
			,,		3 (, , , , , , , , , , , , , , , , , , , ,	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
40	A						
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your		Go to li	ine 12			
	residence?	■ No.			d an aviation judament accine	t vou?	
		☐ Yes.	-		d an eviction judgment agains	t you?	
				No. Go to line 12.	Otatamant Alice to 5 to 5	Andrews American Ver (F. 1918)	12.50 22.20 4.4
				this bankruptcy per		Judgment Against You (Form 101A) and fil	e π as part of

Deb	tor 1	Roxana Martinez				Case number (if known)	
Par	t 3:	Report About Any Bu	sinesses `	You Own	as a Sole Proprie	etor	
12. Are you a sole proprietor of any full- or part-time business? ■ N			■ No.	Go to	Part 4.		
			☐ Yes.	Name	and location of bus	siness	
	busing an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a ate legal entity such corporation, ership, or LLC.		Name	,		
	If you sole p	have more than one proprietorship, use a late sheet and attach		Numb	er, Street, City, Sta	ate & ZIP Code	
		is petition.		Check	the appropriate bo	ox to describe your business:	
					Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))	
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
					Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
					None of the above	ve	
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are small business	déadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set ap lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, stat attions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the p U.S.C. 1116(1)(B).			
	For a	definition of small	■ No.	I am n	ot filing under Chap	pter 11.	
		ess debtor, see 11 . § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
			☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4:	Report if You Own or	Have Any	Hazardo	us Property or An	ny Property That Needs Immediate Attention	
14.		ou own or have any erty that poses or is	■ No.				
	allege of im	ed to pose a threat minent and ifiable hazard to	☐ Yes.	What is t	he hazard?		
	Or do	c health or safety? you own any erty that needs diate attention?			iate attention is why is it needed?		
	perish livesto or a b	kample, do you own nable goods, or ock that must be fed, uilding that needs t repairs?		Where is	the property?		
						Number, Street, City, State & Zip Code	

Debtor 1 Roxana Martinez Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Roxana Martinez			Case number (if)	known)				
Par	t 6: Answer These Quest	ions for Rep	orting Purposes						
	What kind of debts do you have?		are your debts primarily consu	mer debts? Consumer debts are defined , family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			■ Yes. Go to line 17.						
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			Yes. Go to line 17.						
		16c. S	tate the type of debts you owe th	hat are not consumer debts or business de	ebts				
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. G	io to line 18.					
	Do you estimate that after any exempt property is excluded and			ou estimate that after any exempt property le to distribute to unsecured creditors?	is excluded and administrative expenses				
	administrative expenses are paid that funds will		No						
	be available for distribution to unsecured] Yes						
	creditors?								
18.	How many Creditors do	1 -49		□ 1,000-5,000	1 25,001-50,000				
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,000				
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000 ☐ More than100,000					
19.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		- \$100,000	☐ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
		— \$500,00	1 - \$1 HIIIIOH						
20.	How much do you estimate your liabilities	□ \$0 - \$50		☐ \$1,000,001 - \$10 million	\$500,000,001 - \$1 billion				
	to be?		- \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion				
			1 - \$500,000 1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	t 7: Sign Below								
For	you	I have exan	ined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
				n aware that I may proceed, if eligible, und available under each chapter, and I choos					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).								
		I request re	lief in accordance with the chapt	ter of title 11, United States Code, specifie	d in this petition.				
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571.								
		Roxana N	a Martinez Iartinez	Signature of Debtor 2					
		Signature of	f Debtor 1	-					
		Executed o		Executed on					
			MM / DD / YYYY	MM / D	D / YYYY				

Debtor 1 Roxana Martinez		Cas	Case number (if known)			
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	d States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)			
If you are not represented by an attorney, you do not need to file this page.			Pledge after an inquiry that the information in the			
. •	/s/ Adam C. Gomerman	Date	1/14/2019			
	Signature of Attorney for Debtor		MM / DD / YYYY			
	Adam C. Gomerman					
	Printed name					
	Law Offices of Adam C. Gomerman					
	Firm name					
	807 East Jericho Turnpike					
	Huntington Station, NY 11746					
	Number, Street, City, State & ZIP Code					
	Contact phone 631-549-1111	Email address	agomerman@optonline.net			
	2440238 NY					
	Bar number & State		<u> </u>			

Fill	in this inform	ation to identify your case:		
Deb	otor 1	Roxana Martinez		
Doh	otor 2	First Name Middle Name Last Name		
	use if, filing)	First Name Middle Name Last Name		
Unit	ted States Ban	kruptcy Court for the: EASTERN DISTRICT OF NEW YORK		
Cas (if kn	se number		_	c if this is an
			amen	ded filing
Of•	ficial For	m 106Sum		
		f Your Assets and Liabilities and Certain Statistical Information	•	12/15
Be a infoi your	is complete ai rmation. Fill o r original form	nd accurate as possible. If two married people are filing together, both are equally responsible for ut all of your schedules first; then complete the information on this form. If you are filing amend as, you must fill out a new <i>Summary</i> and check the box at the top of this page.	or supplyir	g correct
Par	Summa	rize Your Assets		
			Your a	ssets If what you own
1.	Schedule A/ 1a. Copy line	B: Property (Official Form 106A/B) 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$	68,088.00
	1c. Copy line	63, Total of all property on Schedule A/B	\$	68,088.00
Par	t 2: Summa	rize Your Liabilities		
				abilities t you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	70,872.05
3.	Schedule E/I 3a. Copy the	F: Creditors Who Have Unsecured Claims (Official Form 106E/F) a total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the	e total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	56,569.27
		Your total liabilities	\$	127,441.32
Par	t 3: Summa	rize Your Income and Expenses		
4.		Your Income (Official Form 106I) smbined monthly income from line 12 of Schedule I	\$	6,070.61
5.		Your Expenses (Official Form 106J) onthly expenses from line 22c of Schedule J	\$	6,071.00
Par	t 4: Answei	These Questions for Administrative and Statistical Records		
6.	-	g for bankruptcy under Chapters 7, 11, or 13? have nothing to report on this part of the form. Check this box and submit this form to the court with yo	ur other sch	nedules.
7.	Yes What kind o	f debt do you have?		
		ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for old purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
		ebts are not primarily consumer debts. You have nothing to report on this part of the form. Check this it with your other schedules.	s box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Roxana Martinez Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,498.44

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in	this inform	nation to identify your	case and this filing:				
Debto	r 1	Roxana Martinez					
		First Name	Middle Name	Last Name			
Debto							
(Spouse	e, if filing)	First Name	Middle Name	Last Name			
United	d States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK			
Cooo	numbor					_	
Case	number _						Check if this is an amended filing
							amenaea ming
Offic	<u>cial Fo</u>	<u>rm 106A/B</u>					
Scł	nedul	e A/B: Prop	ertv				12/15
				nce. If an asset fits in more than	one category, list t	he asset in the	category where you
think it	fits best. B	e as complete and accura	ate as possible. If two marrie	d people are filing together, both	are equally respon	sible for suppl	ying correct
	ation. If more	•	a separate sneet to this form	n. On the top of any additional pa	iges, write your nan	ne and case nu	imber (if known).
Part 1:	Describe	Each Residence, Building	g, Land, or Other Real Estate	You Own or Have an Interest In			
1. Do y	ou own or h	ave any legal or equitabl	e interest in any residence, b	ouilding, land, or similar property	?		
_							
■ N	lo. Go to Par	t 2.					
ΠY	es. Where is	s the property?					
Dort 2	Describe	Your Vehicles					
rait 2.	Describe	Tour vernicles					
Do yo	u own, leas	se, or have legal or equ	uitable interest in any veh	icles, whether they are regist	tered or not? Incl	ude any vehic	cles you own that
someo	ne else driv	es. If you lease a vehic	le, also report it on Schedu	le G: Executory Contracts and	Unexpired Leases	3.	
3. Car	s. vans. trı	ucks, tractors, sport u	tility vehicles, motorcycle	es ·			
	,,	., .,	, , , , , , , , , , , , , , , , , , , ,				
	Ю						
■ Y	'es						
3.1	Make:	Гоуоtа	Who has an intere	est in the property? Check one			s or exemptions. Put
	Model:	Highlander	Debtor 1 only				laims on Schedule D: Secured by Property.
	Year:	2015	□ Debtor 2 only		Current value	e of the C	Surrent value of the
	Approximate	e mileage: 55	,422	ebtor 2 only	entire proper		ortion you own?
	Other inform	nation:	☐ At least one of	the debtors and another			
1	Location	: 336 3rd Avenue,					
	Lindenhu	ırst NY 11757		s community property	\$20 ,	,851.00	\$20,851.00
ļ			(see instructions)				
					D (1)		
3.2	Make:	Honda	Who has an interest	est in the property? Check one			s or exemptions. Put laims on Schedule D:
		Accord	Debtor 1 only				Secured by Property.
		2015	Debtor 2 only		Current value	e of the C	Surrent value of the
	Approximate	e mileage: 59	,350 Debtor 1 and D	ebtor 2 only	entire proper	rty? p	ortion you own?
	Other inforn	nation:	At least one of	the debtors and another			
		Sister Drives and p	ays		644	E24.00	644 504 00
	for this v	ehicle		s community property	\$11,	,524.00	\$11,524.00
			(see instructions)				

Deb	tor 1	Roxana	a Martine	z		Case	number (if known)	
3.3	Mode Year: Appro	2010 ximate mili	X 6 eage:	36,700	Who has an interest in the prop □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and		the amount of any secu Creditors Who Have Cl Current value of the entire property?	claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own?
					Check if this is community process (see instructions)	roperty	\$23,324.00	\$23,324.00
Ex □	No Yes	: Boats, tr	ailers, mo	tors, personal wa	d other recreational vehicles, decreaft, fishing vessels, snowment of the common of th	art 2, including any ε	entries for	\$55,699.00
Part Do y				and Household Ite I or equitable int	ms erest in any of the following it	ems?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	Example I No			, furniture, linens,	china, kitchenware			
			H	ousehold Goo	ds and Furnishings			\$1,500.00
E	No	s: Televis	ng cell pho		eo, stereo, and digital equipment edia players, games	; computers, printers,	scanners; music collec	tions; electronic devices
E	xample ■ No		es and figu collections,	rines; paintings, memorabilia, col	orints, or other artwork; books, p lectibles	ictures, or other art ob	jects; stamp, coin, or b	aseball card collections;
E	xample ■ No	s: Sports,	l instrume	ohic, exercise, an	d other hobby equipment; bicycl	es, pool tables, golf cl	ubs, skis; canoes and l	cayaks; carpentry tools;
	No .			ootguns, ammunit	ion, and related equipment			
] No	es: Every	•	s, furs, leather co	ats, designer wear, shoes, acce	ssories		
	Yes. I	Describe.						
			С	lothing				\$500.00

De	ebtor 1	Roxana Marti	nez			Case number (if known)	
12.	Jewelry Examp		elry, cos	stume jewelry, eng	agement rings, wedding rin	gs, heirloom jewelry, watches, gems,	gold, silver
	■ No						
	☐ Yes.	Describe					
13.		r m animals bles: Dogs, cats, b	irds, hor	ses			
	No						
	⊔ Yes.	Describe					
14.	Any oth	ner personal and	housel	nold items you di	d not already list, includin	ng any health aids you did not list	
		Give specific info	rmation.				
		·					
15					Part 3, including any entr	ies for pages you have attached	\$2,000.00
		scribe Your Financi			in any of the following?		Current value of the
D ,	you ow	in or nave any le	gai oi c	quitable interest	in any or the ronowing:		portion you own? Do not deduct secured claims or exemptions.
16.	Cash						
	Examp ☐ No	oles: Money you ha	ave in yo	our wallet, in your	home, in a safe deposit box	, and on hand when you file your petit	ion
	_						
						Cash	\$50.00
47	Danasi	to of manay					
17.						sit; shares in credit unions, brokerage	houses, and other similar
	□ No	institutions. II	you na	ve multiple accour	nts with the same institution,	list each.	
					Institution name:		
				01	Chasa		¢200.00
			17.1.	Checking	Chase		\$300.00
			17.2.	Savings	Chase		\$39.00
40	Danda			hi tua da d'ata alsa			
10.				ly traded stocks ent accounts with t	orokerage firms, money mar	ket accounts	
	■ No			In attention on in ann			
	⊔ Yes			Institution or issue	er name:		
19.	joint ve		ck and	interests in incor	porated and unincorporat	ed businesses, including an intere	st in an LLC, partnership, and
	■ No	Oire en esitie inte		a.b. a.v.t. th. a.m.			
	□ res.	Give specific into		about themne of entity:		% of ownership:	
20.	Negotia	able instruments i	nclude p	ersonal checks, c	gotiable and non-negotiab ashiers' checks, promissory transfer to someone by sign	notes, and money orders.	
	■ No						
	☐ Yes. (Give specific infor					
			ISSU	ıer name:			

De	ebtor 1	Roxana Mart	inez		Case number (if	known)
21.		ment or pension ples: Interests in II		, 403(b), thrift savings acco	ounts, or other pension or profit-s	sharing plans
		List each account	separately. Type of account:	Institution name:		
			401(k)	Primerica		\$10,000.00
22.	Your s		deposits you have made		service or use from a company as, water), telecommunications	companies, or others
	☐ Yes.			Institution name of	or individual:	
23.	_	ties (A contract for	a periodic payment of mo	ney to you, either for life o	r for a number of years)	
	■ No □ Yes.	lss	uer name and description.			
			n IRA, in an account in a 29A(b), and 529(b)(1).	qualified ABLE program	, or under a qualified state tuit	tion program.
	☐ Yes.	Ins	titution name and descript	ion. Separately file the rec	ords of any interests.11 U.S.C. §	521(c):
	■ No	•	ure interests in property	(other than anything liste	ed in line 1), and rights or pow	ers exercisable for your benefit
		•		and other intellectual are	anarty	
26.	_Exam			and other intellectual pro eeds from royalties and lice		
	■ No □ Yes.	Give specific info	rmation about them			
27.	Exam		nd other general intangil nits, exclusive licenses, co		ings, liquor licenses, professiona	al licenses
	■ No □ Yes.	Give specific info	ormation about them			
Mo	oney or	property owed to	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re	funds owed to yo	ou			·
	■ No	_				
	⊔ Yes.	Give specific info	rmation about them, includ	ing whether you already fil	ed the returns and the tax years.	
29.	Exam	r support ples: Past due or I	ump sum alimony, spousa	l support, child support, ma	aintenance, divorce settlement, p	property settlement
	■ No □ Yes.	Give specific info	rmation			
	Exam _l			-	sick pay, vacation pay, workers'	compensation, Social Security
	■ No □ Yes.	Give specific info	ormation			
31.	Interes Examp	sts in insurance p	oolicies	th savings account (HSA);	credit, homeowner's, or renter's	insurance
	■ No □ Yes.	Name the insurar	nce company of each policy	y and list its value.	Paneficia ::	Current day as a few d
Offi	icial Fori	m 106A/B	Company name:	Schedule A/B: Proper	Beneficiary: ty	Surrender or refund page 4

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Debtor	1 Roxana Martinez	Case number (if known)	
			value:
If yo	y interest in property that is due you from someone who has die you are the beneficiary of a living trust, expect proceeds from a life in meone has died.		eive property because
□ Ye	es. Give specific information		
	ims against third parties, whether or not you have filed a lawsu amples: Accidents, employment disputes, insurance claims, or rights		
	es. Describe each claim		
34. Oth	ner contingent and unliquidated claims of every nature, includin	g counterclaims of the debtor and rights to	set off claims
□ Ye	es. Describe each claim		
35. Any ■ No	y financial assets you did not already list		
□Y€	es. Give specific information		
	dd the dollar value of all of your entries from Part 4, including a or Part 4. Write that number here		\$10,389.00
Part 5:	Describe Any Business-Related Property You Own or Have an Interest	n. List any real estate in Part 1.	
37. Do y o	ou own or have any legal or equitable interest in any business-related p	roperty?	
No.	o. Go to Part 6.		
☐ Yes	s. Go to line 38.		
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Ow If you own or have an interest in farmland, list it in Part 1.	n or Have an Interest In.	
46. Do y	you own or have any legal or equitable interest in any farm- or	commercial fishing-related property?	
— 1	No. Go to Part 7.		
	Yes. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did	Not List Above	
	you have other property of any kind you did not already list? amples: Season tickets, country club membership		
■ No			
□Y€	es. Give specific information		
54. A d	dd the dollar value of all of your entries from Part 7. Write that n	umber here	\$0.00

Debtor 1	1 Roxana Martinez		Case number (if known)	
Part 8:	List the Totals of Each Part of this Form			
55. Pa	rt 1: Total real estate, line 2			\$0.00
56. Pa	rt 2: Total vehicles, line 5	\$55,699.00		
57. Pa	rt 3: Total personal and household items, line 15	\$2,000.00		
58. Pa	rt 4: Total financial assets, line 36	\$10,389.00		
59. Pa	rt 5: Total business-related property, line 45	\$0.00		
60. Pa	rt 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Pa	rt 7: Total other property not listed, line 54	\$0.00		
62. To	tal personal property. Add lines 56 through 61	\$68,088.00	Copy personal property total	\$68,088.00
63. To	otal of all property on Schedule A/B. Add line 55 + line 62			\$68,088.00

FI	II in this inform	ation to identify your case:					
De	ebtor 1	Roxana Martinez					
De	ebtor 2	First Name	Middle Name	L	ast Name		
	pouse if, filing)	First Name	Middle Name	L	ast Name		
Ur	nited States Bar	kruptcy Court for the: EAS	TERN DISTRICT OF N	EW Y	ORK		
Ca	ase number						
(if I	known)						Check if this is an amended filing
_	<i>((</i> :	4000		-			amended ming
	fficial For				_		
S	chedule	C: The Prope	rty You Cla	aim	as Exempt		4/16
the nee cas	e property you list eded, fill out and se number (if kn r each item of p	sted on Schedule A/B: Property I attach to this page as many cown). property you claim as exemp	y (Official Form 106A/B) copies of Part 2: Addition of the part 3: Addition of	as yo nal Pa	ther, both are equally responsible for our source, list the property that you age as necessary. On the top of any ount of the exemption you claim.	claim as exadditional p	tempt. If more space is bages, write your name and following so is to state a
any fun exe	y applicable stands—may be un emption to a pa	atutory limit. Some exemption Ilimited in dollar amount. Ho	ns—such as those for owever, if you claim an	r heal n exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu determined to exceed that amoun	enefits, an le under a l	d tax-exempt retirement aw that limits the
Pa	art 1: Identify	the Property You Claim as	Exempt				
1.	Which set of	exemptions are you claiming	g? Check one only, eve	n if yo	our spouse is filing with you.		
	☐ You are cla	iming state and federal nonba	nkruptcy exemptions.	11 U.S	S.C. § 522(b)(3)		
	You are cla	iming federal exemptions. 11	U.S.C. § 522(b)(2)				
2.	For any prop	erty you list on Schedule A/L	3 that you claim as exe	empt,	fill in the information below.		
		on of the property and line on hat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific la	ws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.			
		Highlander 55,422 miles	\$20,851.00		\$902.96	11 U.S.C	C. § 522(d)(2)
	Lindenhurs Line from Sch				100% of fair market value, up to any applicable statutory limit		
	Household	Goods and Furnishings	\$1,500.00		\$1,500.00	11 U.S.C	C. § 522(d)(3)
	Line from Sch	edule A/B. G. 1			100% of fair market value, up to any applicable statutory limit		
	Clothing	edule A/B: 11.1	\$500.00		\$500.00	11 U.S.C	C. § 522(d)(3)
	Line nom Sch	edule A/B. TT.T			100% of fair market value, up to any applicable statutory limit		
	Cash	adula A/D: 16 1	\$50.00		\$50.00	11 U.S.C	C. § 522(d)(5)
	LITE HOTH SCN	edule A/B: 16.1			100% of fair market value, up to any applicable statutory limit		
	Checking: C	Chase edule A/B: 17.1	\$300.00		\$300.00	11 U.S.C	C. § 522(d)(5)
	Line from Sch	eaule A/B: TT.T			100% of fair market value, up to		

Official Form 106C

any applicable statutory limit

Debte	or 1 Roxana l	Martinez			Case number (if known)	
		of the property and line on t lists this property	Current value of the portion you own			
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Savings: Chas		\$39.00		\$39.00	11 U.S.C. § 522(d)(5)
L	ine nom <i>sched</i>	ule A/D. 11.2			100% of fair market value, up to any applicable statutory limit	
	01(k): Primer		\$10,000.00		\$10,000.00	11 U.S.C. § 522(d)(12)
L	ine nom <i>sched</i>	uie A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
	•	g a homestead exemption streent on 4/01/19 and every			led on or after the date of adjustme	nt.)
[_	u acquire the property cove	red by the exemption wi	thin 1	,215 days before you filed this case	?
	☐ No					
	☐ Yes					

Fill in this informa	ation to identify you	r 00001				
Fill in this informa	ation to identify you	r case:				
Debtor 1	Roxana Martine					
Dobtor 2	First Name	Middle Name Last Na	ame			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na	ame			
United States Bank	kruptcy Court for the:	EASTERN DISTRICT OF NEW YORK				
Case number						
(if known)						if this is an
					ameno	led filing
Official Form	106D					
-		Who Have Claims Seco	ured	by Propert	v	12/15
		f two married people are filing together, both out, number the entries, and attach it to this f				
1. Do any creditors h	ave claims secured by	your property?				
☐ No. Check t	this box and submit th	nis form to the court with your other schedu	ıles. You	u have nothing else t	o report on this form.	
Yes. Fill in a	all of the information I	pelow.				
	Secured Claims					
		ears than any appured claim list the graditor per	orotoly	Column A	Column B	Column C
for each claim. If mor	re than one creditor has	nore than one secured claim, list the creditor sep a particular claim, list the other creditors in Part cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Honda Fina	ance	Describe the property that secures the claim	n:	\$16,435.68	\$11,524.00	\$4,911.68
Creditor's Name		2015 Honda Accord 59,350 miles		, .,		_ ,
		Debtor's Sister Drives and pays fo	or			
		this vehicle	414			
P.O. Box 78		As of the date you file, the claim is: Check all apply.	tnat			
Philadelphi	ia, PA 19101	Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the deb	at? Chack and	☐ Disputed Nature of lien. Check all that apply.				
_	it: Check one.	☐ An agreement you made (such as mortgage	o or socii	red		
■ Debtor 1 only ■ Debtor 2 only		car loan)	e or secu	ileu		
Debtor 1 and Deb	ator 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
	e debtors and another	☐ Judgment lien from a lawsuit	iieii)			
☐ Check if this clai		•	nase M	oney Security		
community deb	t					
Date debt was incur	rred	Last 4 digits of account number	889			
2.2 Teachers F	ea Creait	Describe the property that secures the claim	n·	\$34,488.33	\$23,324.00	\$11,164.33
Creditor's Name		2016 Subaru WRX 36,700 miles		,		
		Debtor's Son Drives				
		As of the date you file, the claim is: Check all	that			
PO Box 900		apply.	triat			
Smithtown	<u> </u>	Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the deb	t? Check one.	Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortgage	e or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit	,			
☐ Check if this clai		-	nase M	oney Security		
Date debt was incur	red	Last 4 digits of account number				

Official Form 106D

Debtor 1 Roxana Martinez		Case number (if known)			
First Name Middle N	lame Last Name				
2.3 Toyota Motor Credit	Describe the property that secures the claim:	\$19,948.04	\$20,851.00	\$0.00	
Creditor's Name	2015 Toyota Highlander 55,422 miles Location: 336 3rd Avenue, Lindenhurst NY 11757				
P.O. Box C22202 Owings Mills, MD 21117	As of the date you file, the claim is: Check all that apply. Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	se Money Security			
Date debt was incurred 2018	Last 4 digits of account number 938	32			
•	Column A on this page. Write that number here:	\$70,872.0)5		
If this is the last page of your form, add	i the dollar value totals from all pages.	\$70,872.0)5		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in	this inform	ation to identify your	case:					
Debtor	· 1	Roxana Martinez						
		First Name	Middle Nar	me	Last Name			
Debtor		First Name	Mistalla Nisa		Last Name			
(Spouse	if, filing)	First Name	Middle Nar	me	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN D	ISTRICT OF NE	W YORK			
Case r	number							
(if known				-				check if this is an
							a	mended filing
~ ··· ·	. –	4005/5						
		106E/F						
Sche	edule E/	F: Creditors W	ho Have	Unsecure	d Claims			12/15
Schedul left. Atta name ar	le D: Credito nch the Cont nd case num	ory Contracts and Unexp ors Who Have Claims Sec- inuation Page to this pag ber (if known).	ured by Property e. If you have no	y. If more space i o information to i	s needed, copy	the Part you need, f	ill it out, number the en	tries in the boxes on the
Part 1:		of Your PRIORITY Un						
_	•	rs have priority unsecure	a ciaims againsi	t you?				
	No. Go to Pa	art 2.						
	Yes.			.				
Part 2:		of Your NONPRIORIT						
_	-	rs have nonpriority unsec	_	•				
Ц	No. You have	e nothing to report in this pa	art. Submit this fo	orm to the court wi	th your other sche	edules.		
	Yes.							
uns	secured claim n one credito	nonpriority unsecured cla n, list the creditor separately or holds a particular claim, li	for each claim. I	For each claim list	ed, identify what t	type of claim it is. Do	not list claims already inc	luded in Part 1. If more
								Total claim
4.1	Capital (One	ı	Last 4 digits of a	ccount number	1699		\$1,983.46
		Creditor's Name						
	P.O. Box	с 6492 ream. IL 60197	,	When was the de	bt incurred?	2012		-
		reet City State Zlp Code		As of the date yo	u file, the claim i	is: Check all that app	bly	
	Who incur	red the debt? Check one.						
	■ Debtor	1 only	ļ	☐ Contingent				
	Debtor 2	2 only	ļ	☐ Unliquidated				
	☐ Debtor	1 and Debtor 2 only	I	☐ Disputed				
	☐ At least	one of the debtors and and	other -	Type of NONPRIC	ORITY unsecure	d claim:		
	☐ Check i	if this claim is for a comr	nunity	☐ Student loans				
	debt					aration agreement or	divorce that you did not	
	_	n subject to offset?		report as priority c				
	■ No			•	-	g plans, and other si	milar debts	
	☐ Yes			Other. Specify	Credit card	purchases		-

Debtor 1 R	Roxana Martinez		Case number (if known)	
	pital One	Last 4 digits of account number	5585	\$535.35
	priority Creditor's Name			
_	D. Box 6492	When was the debt incurred?	2011	-
	rol Stream, IL 60197 her Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	incurred the debt? Check one.	7.6 6 au. 5 yeu , c. a	or or one an trial apply	
	Debtor 1 only	Пол		
_	•	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
□ D	Debtor 1 and Debtor 2 only	☐ Disputed		
□ A	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
□с	Check if this claim is for a community	☐ Student loans		
debt			ration agreement or divorce that you did not	
Is the	ne claim subject to offset?	report as priority claims		
■ N	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
□ Y	⁄es	Other. Specify Credit card	purchases	-
4.3 Con	menity	Last 4 digits of account number	7511	\$496.85
Nonp	priority Creditor's Name			
_	Box 659820	When was the debt incurred?	2008	-
	n Antonio, TX 78265 her Street City State Zlp Code	As of the date you file, the claim i	Charle all that apply	
	o incurred the debt? Check one.	As of the date you me, the claim i	s. Check all that apply	
_ `				
	Debtor 1 only	Contingent		
□ D	Debtor 2 only	☐ Unliquidated		
□ D	Debtor 1 and Debtor 2 only	☐ Disputed		
□ A	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
□с	Check if this claim is for a community	☐ Student loans		
debt	t	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the	ne claim subject to offset?	report as priority claims		
■ N	No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Y	/es	Other. Specify Credit card	purchases	-
4.4 Con	menity	Last 4 digits of account number	6538	\$657.07
	priority Creditor's Name	· ·		
	Box 659820	When was the debt incurred?	2011	_
San	n Antonio, TX 78265			
	ber Street City State Zlp Code incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
_		_		
■ D	Debtor 1 only	☐ Contingent		
□ D	Debtor 2 only	☐ Unliquidated		
□ D	Debtor 1 and Debtor 2 only	☐ Disputed		
□ A	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
□с	Check if this claim is for a community	☐ Student loans		
		_		
debt	t	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	t ne claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	iration agreement or divorce that you did not	
	ne claim subject to offset?			

Debtor	1 Roxana Martinez		Case number (if known)	
4.5	Comenity	Last 4 digits of account number	3028	\$473.13
	Nonpriority Creditor's Name	- W/h	2010	
	PO Box 659820 San Antonio, TX 78265	When was the debt incurred?	2016	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.6	Comenity / My Place CC	Last 4 digits of account number	5840	\$381.35
	Nonpriority Creditor's Name	_	-	
	PO Box 659820 San Antonio, TX 78265	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit card	purchases	
4.7	Comenity Bank	Last 4 digits of account number	7091	\$1,111.79
	Nonpriority Creditor's Name		-	
	PO Box 659728 San Antonio, TX 78265-9728	When was the debt incurred?	2016	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	-		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	3	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card	purchases	

Debtor 1 Roxana Martinez		Case number (if known)				
4.8	Credit One Bank	Last 4 digits of account number	5812	\$1,284.48		
	Nonpriority Creditor's Name P.O. Box 60500	When was the debt incurred?	2015			
	City of Industry, CA 91716 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	,	or onest an mat apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify Credit card	debt			
4.9	Discover	Last 4 digits of account number	6669	\$4,329.07		
	Nonpriority Creditor's Name P.O. Box 71084 Charlette NC 38373	When was the debt incurred?	2016			
	Charlotte, NC 28272 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	•	,			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	■ Other Specify Credit card debt				
4.1	Genesis FS Card Services	Last 4 digits of account number	8290	\$3,828.82		
	Nonpriority Creditor's Name					
	PO Box 4477 Beaverton, OR 97076-4477	When was the debt incurred?	2000			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Is the claim subject to offset?	□ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Credit card	purchases			

Debtor	1 Roxana Martinez	Case number (if known)				
4.1	Genesis FS Card Services	Last 4 digits of account number	3011	\$1,023.60		
	Nonpriority Creditor's Name PO Box 4477 Beaverton, OR 97076-4477	When was the debt incurred?	2000	. ,		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
	Home Depot Credit	Last 4 digits of account number	9591	\$818.32		
	Nonpriority Creditor's Name P.O. Box 9001010 Louisville, KY 40290	When was the debt incurred?	2011			
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	I Debt			
4.1	HSBC	Last 4 digits of account number	4607	\$4,179.67		
	Nonpriority Creditor's Name P.O. Box 21550 Tulsa, OK 74121	When was the debt incurred?	2012			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims	<u> </u>			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	■ Other, Specify Credit card				

Debtor 1 Roxana Martinez		Case number (if known)				
4.1	John Deere Financial	Last 4 digits of account number 9946	\$8,042.73			
,	Nonpriority Creditor's Name PO Box 5327	When was the debt incurred?				
	Madison, WI 53705 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify Loan				
4.1	Kohl's Nonpriority Creditor's Name	Last 4 digits of account number 2333	\$299.27			
	P.O. Box 2983 Milwaukee, WI 53201	When was the debt incurred? 2012				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card Debt				
4.1 6	Macys Nonpriority Creditor's Name	Last 4 digits of account number 3093	\$4,189.86			
	9111 Duke Blvd Mason, OH 45040	When was the debt incurred? 2011				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card Debt				

Debtor 1 Roxana Martinez		Case number (if known)			
4.1 7	Merrick Bank	Last 4 digits of account number 7694	\$1,535.17		
	Nonpriority Creditor's Name P.O. Box 23356	When was the debt incurred? 2013			
	Pittsburgh, PA 15222 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Credit card debt			
4.1 8	Raymour & Flanigan	Last 4 digits of account number act2	\$2,388.94		
	Nonpriority Creditor's Name 7230 Morgan Road P.O Box 220 Liverpool, NY 13088-0130				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
4.1 9	Raymour & Flanigan Nonpriority Creditor's Name	Last 4 digits of account number act1	\$593.09		
	7230 Morgan Road P.O Box 220 Liverpool, NY 13088-0130	When was the debt incurred?			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing plans, and other similar debts			
	■ No	_			
	□ 162	Other, Specify			

Debtor	1 Roxana Martinez	Case number (if known)				
4.2	Sears Credit Cards	Last 4 digits of account number	7453	\$4,171.86		
	Nonpriority Creditor's Name P. O. Box 6283 Sioux Falls, SD 57117	When was the debt incurred?	· · · · · · · · · · · · · · · · · · ·			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.2	Seventh Avenue	Last 4 digits of account number	7570	\$1,149.83		
	Nonpriority Creditor's Name 1112 Seventh Avenue Monroe, WI 53566	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Credit card	debt			
4.2	St. Joseph's Hospital	Last 4 digits of account number	6118	\$70.00		
	Nonpriority Creditor's Name Physicians Services 4295 Hempsteasd Tpk Bethpage, NY 11714	When was the debt incurred?	2017			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other Specify Medical				

Debto	r 1 Roxana Martinez	Case number (if known)				
4.2	Sunrise Medical Labs	Last 4 digits of account number	5340	\$52.24		
	Nonpriority Creditor's Name 240 Motor Pkwy. Hauppauge, NY 11788	When was the debt incurred?	5018			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Medical Se	rvices			
4.2	SYNC/GAP	Last 4 digits of account number	6778	\$902.07		
	Nonpriority Creditor's Name PO Box 530942 Atlanta, GA 30353	When was the debt incurred?	2015			
	Number Street City State Zlp Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	- '			
	Yes	Other. Specify Credit card	purchases			
4.2 5	SYNCB	Last 4 digits of account number	0333	\$679.63		
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?	2015			
	Orlando, FL 32896 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	•				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharin				
	☐ Yes	Other, Specify Credit card				
	Yes	Other Specify Credit Card	purcitases			

Debto	1 Roxana Martinez	Case number (if known)				
4.2	SYNCB/Lowes	Last 4 digits of account number	4815	\$2,060.82		
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?	2010			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit card	purchases			
4.2	SYNCB/PC Richards	Last 4 digits of account number	7990	\$4,490.38		
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896	When was the debt incurred?	2016			
	Number Street City State Zlp Code	As of the date you file, the claim				
	Who incurred the debt? Check one.					
	Debtor 1 only					
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	- ·			
	Yes	Other. Specify Credit card	purchases			
4.2	Synchrony Bank	Last 4 digits of account number	3523	\$1,527.00		
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	2013			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured				
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	■ No					
	Yes	Other. Specify Credit card	purchases			

Debtor	Roxana Martinez	Case number (if known)					
4.2 9	Synchrony Bank/JCP	Last 4 digits of account number	3291	\$1,485.31			
	Nonpriority Creditor's Name P.O. Box 960090 Orlando, FL 32896	When was the debt incurred?	2013				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit card	purchases				
4.3	Synchrony Bank/TJX	Last 4 digits of account number	3948	\$400.00			
	Nonpriority Creditor's Name P.O. Box 965064 Orlando, FL 32896-0061	When was the debt incurred?	2001				
	Number Street City State Zlp Code	As of the date you file, the claim					
	Who incurred the debt? Check one.						
	■ Debtor 1 only						
	Debtor 2 only	Debtor 2 only					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit card	purchases				
4.3	Synchrony Bank/Walmart	Last 4 digits of account number	1648	\$1,052.08			
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?	2013				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured					
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other, Specify Credit card purchases					

Debtor	1 Roxana M	Martinez		Case no	umber (if known)		
4.3	Target Card		Last 4 digits of account number	1647	,		\$300.00
	P.O. Box 66	60170	When was the debt incurred?	2015			
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply		
	Debtor 1 onl	lv	☐ Contingent				
	Debtor 2 onl	lv	☐ Unliquidated				
	Debtor 1 and	•	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
			☐ Student loans				
	debt	s claim is for a community bject to offset?	☐ Obligations arising out of a separeport as priority claims	ration ag	greement or divorc	ce that you did not	
	No	bject to onset:	Debts to pension or profit-sharin	a nlane	and other similar	debte	
	■ No □ Yes		Other. Specify Credit Card	•	and other similar	uebis	
4.3	Vivint Inc. Nonpriority Cred	ditor's Name	Last 4 digits of account number	5812	<u> </u>		\$76.03
	62992 Colle		When was the debt incurred?	2018	<u> </u>		
	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply		
	■ Debtor 1 onl	lv	☐ Contingent				
	Debtor 2 onl	•	☐ Unliquidated				
	_		_ •				
	Debtor 1 and	,	☐ Disputed Type of NONPRIORITY unsecure	d claim:			
	_	of the debtors and another	☐ Student loans	a Claiiii.			
	□ Check if thi debt	s claim is for a community	☐ Obligations arising out of a sepa		rraamant ar divara	an that you did not	
		bject to offset?	report as priority claims	iralion ag	greement or divorc	e that you did not	
	■ No		Debts to pension or profit-sharin	g plans,	and other similar	debts	
	☐ Yes		Other Specify Utility Bill				
Part 3:	List Others	s to Be Notified About a Deb	That You Already Listed				
is trying have notified	ng to collect fromore than one ced for any debts	m you for a debt you owe to son reditor for any of the debts that in Parts 1 or 2, do not fill out or mounts for Each Type of Uns		Parts 1 tional cr	or 2, then list the reditors here. If y	e collection agency her ou do not have additio	re. Similarly, if you nal persons to be
	of unsecured cla			oporang		-	amounto for outin
	6a.	Domestic support obligations		6a.		al Claim	
	Total aims	Domestic support obligations		oa.	\$	0.00	
from P		Taxes and certain other debts	you owe the government	6b.	\$	0.00	
	6c.		jury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00	1
	6e.	Total Priority. Add lines 6a throu	ıgh 6d.	6e.	\$	0.00	
					Tota	al Claim	
	6f.	Student loans		6f.	\$	0.00	
	Total aims					·	
from P			paration agreement or divorce that		•	0.00	
	6h.	you did not report as priority c	laims ing plans, and other similar debts	6g. 6h.	\$		
	OII.	Penra to beniation of broth-sugi	הוא אומווס, מווע טנווכו סווווומו עצטנל	OH.	\$	0.00	

Debtor 1 Roxana Martinez			Case number (if known)			
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	56,569.27	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	56,569.27	

Fill in this infor	mation to identify your	case:		
Debtor 1	Roxana Martinez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F NEW YORK	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	•				
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Fill in this i	information to identify your	case:			
Debtor 1	Roxana Martinez				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
(Spouse II, IIIII)	g) Filst Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case numb	er				
(if known)					☐ Check if this is an
					amended filing
⊃α: -: - I	Гажа 400II				
	Form 106H	_			
Sched	ule H: Your Cod	ebtors			12/15
ill it out, an our name a	d number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question	n the Additional Page t	to this page. On the top	eeded, copy the Additional Page, o of any Additional Pages, write
1. Do y	ou have any codebtors? (If y	ou are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
Arizona	in the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spou	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		v states and territories include
in line : Form 1 out Co	2 again as a codebtor only i	f that person is a guaran	tor or cosigner. Make	sure you have listed the 16G). Use Schedule D, 9	g with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
	ame, Number, Street, City, State and ZI	P Code		Check all schedule	<u> </u>
2.1				Ookadula D. Par	
3.1	lame			U Schedule D, line □ Schedule E/F, li	
				☐ Schedule G, line	
_					
	lumber Street City	State	ZIP Code		
	,				
				Пол	
3.2	lame			Schedule D, line	
.,				☐ Schedule E/F, li ☐ Schedule G, line	
_				— Scriedule G, line	
	lumber Street City	State	ZIP Code		
•	,	3.0	0000		

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Eill	in this information to is	dontify your or	200					ı						
	in this information to id	oxana Mar												
	btor 2													
Uni	ited States Bankruptcy	Court for the	EASTERN DISTRICT	OF NEV	V YORK									
	se number nown)	-				Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13 income as of the following date:								
0	fficial Form 1	<u>061</u>						N	/IM / DD/ Y	YYY				
S	chedule I: Yo	our Inco	ome									12/15		
spo atta	use. If you are separach a separate sheet to the describe E Fill in your employr	ated and you o this form. (mployment	are married and not filir r spouse is not filing w On the top of any additi	ith you, onal pag	do not inclu ges, write yo	de infor	mati	on abou	t your spo umber (if	ouse. If me known). A	ore space is Answer every	needed,		
	information.				Debtor 1					Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with information about additional employers.		Employment status ☐ Not employed				■ Employed□ Not employed							
			Occupation	Dietary Aide				Landscaper						
	Include part-time, se self-employed work.	asonal, or	Employer's name	St Joseph Hospital					Self Employed					
	Occupation may include or homemaker, if it a	t annline			Bethpage, NY 11714					Lindenhurst, NY				
		How long employed there? 8 years						10 years						
Par	ft 2: Give Detail	s About Mon	thly Income											
	mate monthly income use unless you are sep		ate you file this form. If	you have	e nothing to re	eport for	any	line, write	e \$0 in the	space. Ind	clude your no	n-filing		
	ou or your non-filing spo e space, attach a sepa		ore than one employer, co	ombine th	ne informatio	n for all e	emplo	oyers for	that perso	on on the li	nes below. If	you need		
								For Del	btor 1		btor 2 or ing spouse			
2.		monthly gross wages, salary, and commissions (beautions). If not paid monthly, calculate what the monthly				2.	\$	2	,698.94	\$	0.00			
3.	Estimate and list monthly overtime pay.					3.	+\$		0.00	+\$	0.00			
4.	Calculate gross Inc	ome. Add lin	ne 2 + line 3.			4.	\$	2,6	98.94	\$	0.00			

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Roxana Martinez				number (if know	n) _			
					For	Debtor 1			ebtor 2 or iling spouse	
	Cop	y line 4 here	4.	-	\$	2,698.9	4	\$	0.00)
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	1	\$	381.7	7	\$	0.00	1
	5b.	Mandatory contributions for retirement plans	5b		<u>\$</u> —	0.0		\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$	46.5	_	\$	0.00	_
	5d.	Required repayments of retirement fund loans	5d		<u>*</u> —	0.0		\$	0.00	
	5e.	Insurance	5e		<u>*</u> —	0.0	_	\$	0.00	_
	5f.	Domestic support obligations	5f.		\$	0.0	_	\$	0.00	_
	5g.	Union dues	5g	١.	\$	0.0	_	\$	0.00	
	5h.	Other deductions. Specify:	5h		\$	0.0		\$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	428.3		\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,270.6		\$	0.00	_
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0			·		· 		_
	01	monthly net income.	8a		\$	0.0		\$	2,600.00	
	8b.	Interest and dividends	8b).	\$	0.0	0_	\$	0.00	<u>)</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	0.0		\$	0.00	
	8d.	Unemployment compensation	8d		\$	0.0		\$	0.00	
	8e.	Social Security	8e	.	\$	0.0	0	\$	0.00)
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g	J.	\$ \$	0.0	0	\$	0.00	<u>)</u>
	8h.	Other monthly income. Specify: Support from family	_ 8h	1.+	\$	1,200.0	0 +	\$	0.00	<u>)</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	1,200.0	0	\$	2,600.0	00
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		3,470.61 +	\$	2.60	0.00 = \$	6,070.61
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· —		,	· —	,	-	0,010101
11.	State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: 11. +\$ 0.00									
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines							12. \$ Comb	
12	Do.	voll expect an increase or decrease within the year ofter you file this form	2						month	nly income
13.		ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	-							

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
	otor 1 Roxana Martinez			eck if this is:	
1	otor 2ouse, if filing)				wing postpetition chapter the following date:
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW Y	YORK		MM / DD / YYYY	
1	se number known)				
	fficial Form 106J chedule J: Your Expenses				12/1
Be	as complete and accurate as possible. If two married people a commation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				or supplying correct
Par 1.	tt 1: Describe Your Household Is this a joint case?				
١.	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i>	es for Separate Househo	old of De	btor 2.	
2.	Do you have dependents? No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Son		 8	□ No ■ Yes
	dependents names.				■ Yes □ No
		Daughter			■ Yes □ No
		Daughter		15	■ Yes
		Son		18	□ No ■ Yes
		Daughter		21	□ No ■ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless penses as of a date after the bankruptcy is filed. If this is a supplicable date.				
Inc	clude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i>			Your exp	enses
(0,	mount of the root,				
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4.	\$	2,200.00
	If not included in line 4:				
	4a. Real estate taxes		4a.	·	0.00
	4b. Property, homeowner's, or renter's insurance		4b.	·	0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. 4d.		0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	4u. 5.	·	0.00

Debtor 1	Roxana Martinez	Case number (if known)	

Debtor 1 Roxana	Martinez	Case num	nber (if known)	
I IAIIIAI a a a				
 Utilities: 6a. Electricity 	v, heat, natural gas	6a.	¢	350.00
	•		· -	
	ewer, garbage collection	6b.	·	25.00
•	e, cell phone, Internet, satellite, and cable services	6c.	· <u> </u>	400.00
6d. Other. Sp	·	6d.	·	0.00
Food and hous	sekeeping supplies	7.	*	600.00
Childcare and	children's education costs	8.	\$	0.00
Clothing, laund	dry, and dry cleaning	9.	\$	150.00
O. Personal care	products and services	10.	\$	145.00
Medical and de	ental expenses	11.	\$	25.00
	Include gas, maintenance, bus or train fare.	40	Φ.	400.00
Do not include of		12.		
	, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
 Charitable con 	tributions and religious donations	14.	\$	0.00
5. Insurance.			_	
	nsurance deducted from your pay or included in lines 4 or 20.			
15a. Life insur	ance	15a.	\$	0.00
15b. Health ins	surance	15b.	\$	0.00
15c. Vehicle ir	nsurance	15c.	\$	558.00
15d. Other ins		15d.	\$	0.00
	nclude taxes deducted from your pay or included in lines 4 or 2		•	
Specify:		16.	\$	0.00
7. Installment or			•	
	nents for Vehicle 1	17a.	· ·	684.00
	nents for Vehicle 2	17b.	\$	534.00
17c. Other. Sp	pecify:	17c.	\$	0.00
17d. Other. Sp	pecify:	17d.	\$	0.00
	s of alimony, maintenance, and support that you did not re		e	0.00
aeauctea from	your pay on line 5, <i>Schedule I, Your Income</i> (Official Forn ts you make to support others who do not live with you.	1 1061).	\$ \$	
	is you make to support others who do not live with you.	40	· .	0.00
Specify:		19.		
	perty expenses not included in lines 4 or 5 of this form or one on other property	20a.		0.00
			· -	0.00
20b. Real esta		20b.	· -	0.00
	homeowner's, or renter's insurance	20c.	· -	0.00
20d. Maintena	nce, repair, and upkeep expenses	20d.	·	0.00
20e. Homeowr	ner's association or condominium dues	20e.	\$	0.00
1. Other: Specify:		21.	+\$	0.00
Calculate veur				
2. Calculate your 22a. Add lines 4	monthly expenses		L &	6 074 00
	<u> </u>	10010	\$	6,071.00
	22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
22c. Add line 22	2a and 22b. The result is your monthly expenses.		\$	6,071.00
3. Calculate your	monthly net income.			
	12 (your combined monthly income) from Schedule I.	23a.	\$	6,070.61
	ir monthly expenses from line 22c above.	23b.	-\$	6,071.00
.,,				
	your monthly expenses from your monthly income. It is your <i>monthly net income</i> .	23c.	\$	-0.39
For example, do y modification to the	an increase or decrease in your expenses within the year ou expect to finish paying for your car loan within the year or do you exe terms of your mortgage?			e or decrease because of a
No.				
☐ Yes.	Explain here:			

ill in this infor	rmation to identify your	case:			
Debtor 1	Roxana Martinez				
	First Name	Middle Name	Last Name		
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States B	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
ase number					
f known)					☐ Check if this is an amended filing
	<u>m 106Dec</u> tion About a	an Individual	Debtor's Schee	dules	12/1
ou must file th	is form whenever you fi	ile bankruptcy schedules	nsible for supplying correct in or amended schedules. Makin	ng a false statem	
ou must file th btaining mone	is form whenever you fi	ile bankruptcy schedules n connection with a bank	•	ng a false statem	
ou must file the thotaining mone ears, or both.	is form whenever you fi y or property by fraud in	ile bankruptcy schedules n connection with a bank	or amended schedules. Makii	ng a false statem	
ou must file the otaining mone ears, or both.	is form whenever you fi by or property by fraud in 18 U.S.C. §§ 152, 1341, 1 In Below	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Makii	ng a false statemos s up to \$250,000,	
ou must file the otaining mone ears, or both.	is form whenever you fi by or property by fraud in 18 U.S.C. §§ 152, 1341, 1 In Below	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Makin cruptcy case can result in fines	ng a false statemos s up to \$250,000,	
ou must file the btaining mone ears, or both. Sig	is form whenever you fi by or property by fraud in 18 U.S.C. §§ 152, 1341, 1 In Below	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Makin cruptcy case can result in fines	ng a false statemes up to \$250,000, ptcy forms? Attach Bankru	or imprisonment for up to 20 ptcy Petition Preparer's Notice,
Did you pa	is form whenever you file or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gr Below ay or agree to pay some	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Makin cruptcy case can result in fines	ng a false statemes up to \$250,000, ptcy forms? Attach Bankru, Declaration, an	or imprisonment for up to 20 ptcy Petition Preparer's Notice, nd Signature (Official Form 119
Did you pa	is form whenever you five or property by fraud in 18 U.S.C. §§ 152, 1341, 1 grade and the second sec	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Making truptcy case can result in fines ney to help you fill out bankru	ng a false statemes up to \$250,000, ptcy forms? Attach Bankru, Declaration, an	or imprisonment for up to 20 ptcy Petition Preparer's Notice, nd Signature (Official Form 119
Did you pa No Ves. Under penathat they an X /s/ Ro Roxar	is form whenever you five or property by fraud in 18 U.S.C. §§ 152, 1341, 1 gn Below ay or agree to pay some Name of person alty of perjury, I declare re true and correct.	ile bankruptcy schedules n connection with a bank 1519, and 3571.	or amended schedules. Making truptcy case can result in fines and the schedules filed with	ng a false statemes up to \$250,000, ptcy forms? Attach Bankru, Declaration, and	or imprisonment for up to 20 ptcy Petition Preparer's Notice, nd Signature (Official Form 119

Official Form 106Dec

EIII I	n this inform	nation to identify you	r case.			
Debt	IOF 1	Roxana Martine:	Middle Name	Last Name		
Debt (Spou	tor 2 se if, filing)	First Name	Middle Name	Last Name		
` '		nkruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
(if kno	e number 				_	Check if this is an amended filing
	icial Foi					
			Affairs for Individ			4/16
infori	mation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write yo	
Part	1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		_
1. \	What is your	current marital statu	ıs?			
 	■ Married □ Not mar	ried				
2. I	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
ı	■ No		·	·		
İ	_	t all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	v.	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					nity property state or territor ico, Texas, Washington and V	
1	■ No	ke sure vou fill out Sci	hedule H: Your Codebtors (O	fficial Form 106H)		
		·	,	molari omi roorij.		
Part	2 Explain	n the Sources of You	r Income			
I	Fill in the tota	I amount of income yo	nployment or from operating u received from all jobs and a have income that you received.	all businesses, including part		ndar years?
[□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$1,300.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
	last calendaı uary 1 to De	r year: cember 31, 2018)	☐ Wages, commissions, bonuses, tips	\$24,000.00	☐ Wages, commissions, bonuses, tips	\$23,000.00
			☐ Operating a business		☐ Operating a business	
Officia	l Form 107		Statement of Financial Aff	airs for Individuals Filing for E	Sankruptcv	page 1

De	ebtor 1 Roxana Mar	tinez			Case	number (if known)		
		Debto	r 1			Debtor 2		
			es of income all that apply.	Gross income (before deductions exclusions)	and	Sources of inco		Gross income (before deductions and exclusions)
	or the calendar year be anuary 1 to December		ges, commissions, es, tips	\$34,55	9.00	☐ Wages, comr bonuses, tips	nissions,	\$36,502.00
		□ Оре	erating a business			☐ Operating a b	ousiness	
5.	Did you receive any Include income regard and other public benewinnings. If you are fill List each source and the No	lless of whether that in fit payments; pensions ing a joint case and yo	ncome is taxable. Exa s; rental income; intere ou have income that you	mples of other income est; dividends; money ou received together,	e are alir collecte list it on	ed from lawsuits; r ly once under De	oyalties; and btor 1.	ecurity, unemployment, d gambling and lottery
	☐ Yes. Fill in the de	etails.						
			es of income pe below.	Gross income from each source (before deductions exclusions)		Debtor 2 Sources of inco Describe below.	ome	Gross income (before deductions and exclusions)
	·	90 days before you fi Go to line 7. List below each cree paid that creditor. D	al, family, or household led for bankruptcy, did ditor to whom you paid o not include payment ts to an attorney for th	d you pay any creditor d a total of \$6,425* or ts for domestic suppo	more in	one or more payr	ments and th	
	Yes. Debtor 1 c	or Debtor 2 or both h	/19 and every 3 years ave primarily consulled for bankruptcy, dic	mer debts.			adjustment.	
	■ No.	Go to line 7.						
	□ _{Yes}							creditor. Do not noclude payments to an
	Creditor's Name and	d Address	Dates of paymer		unt aid	Amount you still owe	Was this p	ayment for
7.		elatives; any general ficer, director, person	partners; relatives of a in control, or owner of	any general partners; f 20% or more of their	partners voting s	ships of which you securities; and an	ı are a genei y managing	ral partner; corporations agent, including one for
	■ No □ Yes, List all payr	nents to an insider.						
	Insider's Name and		Dates of paymer		unt aid	Amount you still owe	Reason fo	r this payment

De	btor 1 Roxana Martinez		Cas	se number (if known)		
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		yments or transfer a	any property on a	ccount of a de	ebt that benefited an
	include payments on debts guaranteed or cost	grica by air moider.				
	No					
	Yes. List all payments to an insider	D-1 (T-1-1	A	D (4.1
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Include cred	this payment itor's name
Pa	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
).	Within 1 year before you filed for bankrupto List all such matters, including personal injury of modifications, and contract disputes.					
	No					
	Yes. Fill in the details.	Natura of the case	Count on one		Ctatus of th	
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11.		perty repossessed, f	oreclosed, garnis	shed, attached	l, seized, or levied?
	Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property	1	Date		Value of the property
		Explain what happene	ed			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		cluding a bank or fii	nancial institutior	ı, set off any a	mounts from your
	Creditor Name and Address	Describe the action th	ne creditor took	Date	action was	Amount
				taker		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or ar		perty in the possess	ion of an assigne	e for the bene	fit of creditors, a
	No					
	☐ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrupt ■ No	cy, did you give any gif	its with a total value	of more than \$60	0 per person?	•
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$600 per person	Describe the gifts	S	Date: the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrupt No	cy, did you give any git	ts or contributions	with a total value	of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or cont	ribution.				
	Gifts or contributions to charities that total more than \$600 Charity's Name	Describe what yo	ou contributed		s you ributed	Value
	Address (Number, Street, City, State and ZIP Code)					
Pa	rt 6: List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Deb	otor 1 R	oxana Martinez			Case number	(if known)	
	or gamb	ling?					
	3	J					
	■ No Yes	. Fill in the details.					
		e the property you lost and loss occurred	Include	be any insurance coverage for the lot the amount that insurance has paid. Lot ce claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Dar	17. lie	st Certain Payments or Transfers	c				
16.	Within 1	year before you filed for bankrued about seeking bankruptcy or	ıptcy, di preparir	d you or anyone else acting on your ng a bankruptcy petition?			rty to anyone you
	□ No						
		. Fill in the details.					
	Address Email o	Who Was Paid s r website address Who Made the Payment, if Not \	Y OU	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Adam 807 Ea Huntin	C. Gomerman, Esq. st Jericho Turnpike gton Station, NY 11746 rman@optonline.net		Attorney Fees		1/14/19	\$1,775.00
	promise		ditors o	d you or anyone else acting on your r to make payments to your creditor ed on line 16.		or transfer any prope	rty to anyone who
	■ No						
	☐ Yes	. Fill in the details.					
	Person Address	Who Was Paid s		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment
	Include beinclude g	red in the ordinary course of you	u r busin s made a	as security (such as the granting of a se			
	Person Address	Who Received Transfer s		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person'	's relationship to you			paid iii CA		
	beneficia ■ No	O years before you filed for bankary? (These are often called assert Fill in the details.		did you transfer any property to a s ion devices.)	elf-settled tru	ust or similar device	of which you are a
	Name o	f trust		Description and value of the prope	erty transferr	ed	Date Transfer was made

Case number (if known)

Par	t 8: List of Certain Financial Accounts, Inst	ruments Safe Denosit B	oxes and Storage	a Units	
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ No Yes. Fill in the details.	were any financial acco	unts or instrumen	ts held in your name, or for yo	
	Name of Financial Institution and	•	ype of account or nstrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for ba	ankruptcy, any sat		tory for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acces Address (Number, Stree State and ZIP Code)		cribe the contents	Do you still have it?
22.	Have you stored property in a storage unit or No Yes. Fill in the details.		ome within 1 year	before you filed for bankrupto	y?
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had to it? Address (Number, Stree State and ZIP Code)		cribe the contents	Do you still have it?
	Do you hold or control any property that som for someone.		e any property you	ı borrowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proper (Number, Street, City, State Code)	ty? Desc	cribe the property	Value
Par	t 10: Give Details About Environmental Infor	,			
	the purpose of Part 10, the following definition				
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface w	ater, groundwate	•	
	Site means any location, facility, or property a to own, operate, or utilize it, including dispos	•	vironmental law, w	hether you now own, operate	, or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, con	onmental law defines as	a hazardous wast	e, hazardous substance, toxid	substance,
Rep	ort all notices, releases, and proceedings that	you know about, regard	less of when they	occurred.	
24.	Has any governmental unit notified you that y	ou may be liable or pote	ntially liable unde	r or in violation of an environ	mental law?
	■ No				
	Yes. Fill in the details.	Governmental	-	invironmental law if you	Data of nation
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Stree ZIP Code)	_	Environmental law, if you know it	Date of notice

Debtor 1 Roxana Martinez

Case number (if known)

25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admi	nistrative proceeding under any envi	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptc	y, did you own a business or have an	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compa	ny (LLC) or limited liability partnershi	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	cutive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	rt 12.		
	Yes. Check all that apply above and fill in	n the details below for each business	i <u>.</u>	
		Describe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security i	number or IIIN.
			Dates business existed	
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	y, did you give a financial statement t	o anyone about your business? Inclu	de all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

Debtor 1 Roxana Martinez

Debto	r 1 Roxana Martinez		Case number (if known)
Part 1	2: Sign Below		
are tru with a	e and correct. I understand th	at making a false statement, concealing prop fines up to \$250,000, or imprisonment for up	nts, and I declare under penalty of perjury that the answers perty, or obtaining money or property by fraud in connection o to 20 years, or both.
/s/ Ro	oxana Martinez		
	na Martinez ture of Debtor 1	Signature of Debtor 2	
Date	1/14/2019	Date	
Did yo	u attach additional pages to \	our Statement of Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did yo	u pay or agree to pay someor	e who is not an attorney to help you fill out b	pankruptcy forms?
■ No			
☐ Yes	. Name of Person . Attac	h the Bankruptcy Petition Preparer's Notice, De	claration, and Signature (Official Form 119).

Debtor 1				
	Roxana Martinez			
D-64 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRIC	CT OF NEW YORK	
Casa number				
Case number(if known)				Check if this is an amended filing
Official For		n for Indivi	duals Filing Under Chapt	ter 7 12/15
creditors have	vidual filing under chap claims secured by you ed personal property a	ur property, or		
You must file this	s form with the court water is earlier, unless the	ithin 30 days after ye	ou file your bankruptcy petition or by the date time for cause. You must also send copies to t	
	ople are filing together d date the form.	in a joint case, both	are equally responsible for supplying correct	information. Both debtors must
	nd accurate as possibl our name and case num		needed, attach a separate sheet to this form. O	n the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
		e Secureu Ciainis		
	ors that you listed in Pa		Creditors Who Have Claims Secured by Proper	rty (Official Form 106D), fill in the
information be	ors that you listed in Pa	art 1 of Schedule D:	Creditors Who Have Claims Secured by Property the Secures a debt?	at Did you claim the property
information be	ors that you listed in Pa low.	art 1 of Schedule D:	What do you intend to do with the property th	
information be Identify the cre	ors that you listed in Pa low.	art 1 of Schedule D:	What do you intend to do with the property th secures a debt?	at Did you claim the property
information be Identify the cre Creditor's Honame:	ors that you listed in Pa low. ditor and the property th onda Finance	art 1 of Schedule D:	What do you intend to do with the property th secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a	at Did you claim the property as exempt on Schedule C?
information be Identify the cre Creditor's Honame:	ors that you listed in Pa low. ditor and the property th	art 1 of Schedule D: onat is collateral	What do you intend to do with the property th secures a debt? Surrender the property. Retain the property and redeem it.	at Did you claim the property as exempt on Schedule C?
information be Identify the cre Creditor's Honame: Description of property	ors that you listed in Pa low. ditor and the property the onda Finance 2015 Honda Accord miles Debtor's Sister Driv	art 1 of Schedule D: onat is collateral	What do you intend to do with the property th secures a debt? □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement.	at Did you claim the property as exempt on Schedule C?
information be Identify the cre Creditor's Honame: Description of property securing debt:	ors that you listed in Pa low. ditor and the property the onda Finance 2015 Honda Accord miles Debtor's Sister Driv	art 1 of Schedule D: onat is collateral d 59,350 ves and pays	What do you intend to do with the property th secures a debt? □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	at Did you claim the property as exempt on Schedule C?
information be Identify the cre Creditor's Honame: Description of property securing debt: Creditor's Tename:	ors that you listed in Pallow. Iditor and the property the conda Finance 2015 Honda Accord miles Debtor's Sister Drive for this vehicle	art 1 of Schedule D: onat is collateral d 59,350 ves and pays	What do you intend to do with the property th secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and redeem it.	at Did you claim the property as exempt on Schedule C? □ No ■ Yes
Creditor's Honame: Description of property securing debt: Creditor's Te	ors that you listed in Pallow. Iditor and the property the conda Finance 2015 Honda According the conda Finance 2015 Honda According the conda Finance Con	art 1 of Schedule D: onat is collateral d 59,350 ves and pays Jnion 36,700 miles	What do you intend to do with the property th secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	at Did you claim the property as exempt on Schedule C? □ No ■ Yes □ No
Creditor's Honame: Description of property securing debt: Creditor's Tename: Description of property securing debt:	ors that you listed in Palow. Iditor and the property the conda Finance 2015 Honda Accordaniles Debtor's Sister Drivers for this vehicle 2016 Subaru WRX Debtor's Son Drivers	art 1 of Schedule D: onat is collateral d 59,350 ves and pays Jnion 36,700 miles	What do you intend to do with the property th secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes
Creditor's Honame: Description of property securing debt: Creditor's Tename: Description of property securing debt:	ors that you listed in Pallow. Iditor and the property the conda Finance 2015 Honda Accordatiles Debtor's Sister Drive for this vehicle eachers Fed Credit U	art 1 of Schedule D: onat is collateral d 59,350 ves and pays Jnion 36,700 miles	What do you intend to do with the property the secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	at Did you claim the property as exempt on Schedule C? □ No ■ Yes □ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 _F	Roxana Martinez	Case numbe	r (if known)
property securing o	Location: 336 3rd Avenue, debt: Lindenhurst NY 11757	☐ Retain the property and [explain]:	
Part 2: Li	st Your Unexpired Personal Property	Leases	
or any une	xpired personal property lease that your real personal property lease that you retired the property lease that you real estate le	ou listed in Schedule G: Executory Contracts and Uases. Unexpired leases are leases that are still in eases if the trustee does not assume it. 11 U.S.C. §	ffect; the lease period has not yet ended.
Describe yo	our unexpired personal property lease	es	Will the lease be assumed?
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Lessor's nar	me:		□ No
Description of Property:	of leased		☐ Yes
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
Lessor's nar			□ No
Description of Property:	of leased		☐ Yes
Lessor's nan			□ No
Description of Property:	of leased		☐ Yes
Dort 2: Si	an Polow		
Jnder penal	gn Below ty of perjury, I declare that I have indi t is subject to an unexpired lease.	cated my intention about any property of my estate	e that secures a debt and any personal
X /s/ Ro	xana Martinez	X	
	na Martinez ure of Debtor 1	Signature of Debtor 2	
Date	1/14/2019	Date	

							_					
Fill in the	his informa	ation to identify your	case:							rected	in this form and	in Form
Debtor	1 _	Roxana Martinez	<u>:</u>				122	2A-1Su	pp:			
Debtor (Spouse,	_							■ 1. Th	nere is no presi	umption	of abuse	
		nkruptcy Court for the	he: Eastern	District o	f New Y	/ork		а	pplies will be m	nade un	ider <i>Chapter 7 l</i>	nption of abuse Means Test
	umber _								Calculation (Offi		,	
(if known))										ot apply now be e but it could ap	
O.(:-! =-	4004	4					□ Che	eck if this is a	n ame	nded filing	
		<u>rm 122A - 1</u>		_								
Cha	pter 7	' Statemen	t of You	ır Cu	rren	t Monthi	y Inc	ome)			12/15
attach a case nui qualifyin	separate s mber (if kn ng military	d accurate as possible heet to this form. Incomp. If you believe to service, complete and	lude the line no hat you are exe d file <i>Statemen</i>	umber to empted fro t of Exem	which thom a pre	ne additional info	rmation a	applies. se you d	On the top of ar	ny additi narily co	ional pages, writ onsumer debts o	e your name and r because of
Part 1:		ulate Your Current										
		ur marital and filing	•		nly.							
		ried. Fill out Columi and your spouse i	•		uit hoth	Columna A ana	ID lines	2 11				
	_							2-11.				
_		and your spouse i	•	-		•						
		in the same hous		_							4.1	
	penal	separately or are ty of perjury that you apart for reasons the	u and your spo	ouse are	legally	separated unde	r nonban	kruptcy	law that applie	es or the		
101(² the 6	10A). For extending months, ac	ge monthly income to cample, if you are filing do the income for all 6 e same rental property,	on September months and divi	15, the 6-r de the tota	month pe al by 6. F	eriod would be Ma fill in the result. Do	rch 1 throu not includ	ugh Augu de any in	ust 31. If the amo come amount me	unt of your	our monthly incom once. For examp	e varied during le, if both
<u> </u>	303 OWN LIN	same remai property,	, put the moonie	nom mac	property	in one column on	iy. ii you ii	Colum		Colur	<u> </u>	400.
								Debto		Debte	or 2 or filing spouse	
	our gross ayroll dedu	wages, salary, tip actions).	s, bonuses, c	vertime	, and co	ommissions (b	efore all	\$	2,698.44	\$	0.00	
	limony an	d maintenance pa	yments. Do n	ot include	e payme	ents from a spor	use if	\$	0.00	\$	0.00	
of fro ar	f you or you om an unn nd roomma	s from any source our dependents, in narried partner, mer ates. Include regula	ncluding child mbers of your l r contributions	I suppor househol from a s	t. Includ	de regular contri dependents, pa	butions rents,	Ф.	0.00	Ф.	0.00	
		not include paymen from operating a	business, pro	ofession	, or farı	m		\$	0.00	\$	0.00	
G	ross recei	pts (before all	D	ebtor 1		Debtor 2						
de	eductions)	,	\$	0.00	\$	2,600.00						
	rdinary an perating ex	d necessary kpenses	-\$	0.00	-\$	0.00						
		r income from a rofession, or farm	\$	0.00	\$	2,600.00	Copy here ->	\$	0.00	\$	2,600.00	
6. N	et income	from rental and o	ther real prop	erty								
_					¢	Debtor 1 0.00						
		pts (before all deduc	,		\$ -\$	0.00						
	•	d necessary operati	• .	oroperty	-Ψ _ \$		here ->	\$	0.00	\$	0.00	
	•	vidends, and royal		о. орону	Ψ _			\$	0.00	\$	0.00	

Official Form 122A-1

Case number (if known)

					Column Debtor		Column B Debtor 2 o		
8.	Unemploy	ment compensation			\$	0.00	\$	0.00	
		er the amount if you contend that the amoun Security Act. Instead, list it here:	t received was a ben	efit unde	r				
	For you	<u> </u>	;	0.00					
		spouse \$		0.00					
9.	Pension o	r retirement income. Do not include any arder the Social Security Act.	nount received that w	vas a	\$	0.00	\$	0.00	
10.	Do not incl received as	om all other sources not listed above. Speude any benefits received under the Social sa victim of a war crime, a crime against huberrorism. If necessary, list other sources on a same sources on a same sources.	Security Act or paymemanity, or internation	ents al or					
	· <u>F</u>	amily Support			\$	1,200.00	\$	0.00	
					\$	0.00	\$	0.00	
	To	otal amounts from separate pages, if any.		+	. \$	0.00	\$	0.00	
11.		your total current monthly income. Add linn. Then add the total for Column A to the to		\$	3,898.44	+ \$	2,600.00	= \$	6,498.44
Part	2: Det	ermine Whether the Means Test Applies t	o You					incom	e
12.	Calculate	your current monthly income for the year	Follow these steps:						
	12a. Copy	your total current monthly income from line	11		C	opy line 11	here=>	\$	6,498.44
	Multip	oly by 12 (the number of months in a year)						X '	
	12b. The re	esult is your annual income for this part of th	e form				12	b. \$	77,981.28
13.	Calculate	the median family income that applies to	you. Follow these st	eps:					
	Fill in the s	tate in which you live.	NY						
	Fill in the n	number of people in your household.	7						
	To find a lis	nedian family income for your state and size st of applicable median income amounts, go m. This list may also be available at the bank	online using the link	specified	d in the sep	arate instruc	tions 13.	\$ <u>1</u>	25,143.00
14.	How do th	e lines compare?							
	14a.	Line 12b is less than or equal to line 13. C	on the top of page 1,	check bo	x 1, There	is no presun	nption of abu	se.	
	Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2.</i> Go to Part 3 and fill out Form 122A-2.								
art	Part 3: Sign Below								
	ŭ	gning here, I declare under penalty of perjury	that the information	on this s	tatement a	nd in any att	achments is t	true and c	orrect.
	X /s/ Roxana Martinez Roxana Martinez								
	Signature of Debtor 1 Date 1/14/2019								
	MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.								
	If you checked line 14h, fill out Form 122A-2 and file it with this form								

Roxana Martinez

Debtor 1

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

In re	Roxana Martinez		Case N	No.	
		Debtor(s)	Chapte		
	DISCLOSURE OF COMPEN	NSATION OF ATTO	ORNEY FOR	DEBTOR(S	5)
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing per rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankrupto	cy, or agreed to be p	oaid to me, for sea	
	For legal services, I have agreed to accept		\$	1,775.0	00_
	Prior to the filing of this statement I have received			1,775.0	00_
	Balance Due			0.0	00_
2. 1	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	I have not agreed to share the above-disclosed compo	ensation with any other person	on unless they are n	nembers and asso	ciates of my law firm.
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name				of my law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all asp	ects of the bankrupt	cy case, including	g:
t c	 Analysis of the debtor's financial situation, and rende Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of credito [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicatio 522(f)(2)(A) for avoidance of liens on hor 	ement of affairs and plan whors and confirmation hearing, educe to market value; ens as needed; preparation	ich may be required and any adjourned exemption planni	; hearings thereof; ng; preparatio	n and filing of
б. I	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			ances, relief fro	om stay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement	for payment to me f	or representation	of the debtor(s) in
_1/	14/2019	/s/ Adam C. Go			
D	ate	Adam C. Gome Signature of Attor			
		Law Offices of	Adam C. Gomeri	man	
		807 East Jerich Huntington Sta			
			tion, NY 11746 Fax: 631-759-292	5	
		agomerman@c	ptonline.net		
		Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Roxana Martinez	Case No.		
		Debtor(s)	Chapter	7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date:	1/14/2019	/s/ Roxana Martinez
		Roxana Martinez
		Signature of Debtor
Date:	1/14/2019	/s/ Adam C. Gomerman
		Signature of Attorney
		Adam C. Gomerman
		Law Offices of Adam C. Gomerman
		807 East Jericho Turnpike
		Huntington Station, NY 11746
		631-549-1111 Fax: 631-759-2925

USBC-44 Rev. 9/17/98

Capital One P.O. Box 6492 Carol Stream, IL 60197

Capital One P.O. Box 6492 Carol Stream, IL 60197

Comenity PO Box 659820 San Antonio, TX 78265

Comenity
PO Box 659820
San Antonio, TX 78265

Comenity
PO Box 659820
San Antonio, TX 78265

Comenity / My Place CC PO Box 659820 San Antonio, TX 78265

Comenity Bank PO Box 659728 San Antonio, TX 78265-9728

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716

Discover P.O. Box 71084 Charlotte, NC 28272

Genesis FS Card Services PO Box 4477 Beaverton, OR 97076-4477

Genesis FS Card Services PO Box 4477 Beaverton, OR 97076-4477

Home Depot Credit P.O. Box 9001010 Louisville, KY 40290

Honda Finance P.O. Box 7856 Philadelphia, PA 19101

HSBC P.O. Box 21550 Tulsa, OK 74121

John Deere Financial PO Box 5327 Madison, WI 53705

Kohl's P.O. Box 2983 Milwaukee, WI 53201

Macys 9111 Duke Blvd Mason, OH 45040

Merrick Bank P.O. Box 23356 Pittsburgh, PA 15222

Raymour & Flanigan 7230 Morgan Road P.O Box 220 Liverpool, NY 13088-0130

Raymour & Flanigan 7230 Morgan Road P.O Box 220 Liverpool, NY 13088-0130

Sears Credit Cards P. O. Box 6283 Sioux Falls, SD 57117

Seventh Avenue 1112 Seventh Avenue Monroe, WI 53566 St. Joseph's Hospital Physicians Services 4295 Hempsteasd Tpk Bethpage, NY 11714

Sunrise Medical Labs 240 Motor Pkwy. Hauppauge, NY 11788

SYNC/GAP PO Box 530942 Atlanta, GA 30353

SYNCB PO Box 965036 Orlando, FL 32896

SYNCB/Lowes PO Box 965036 Orlando, FL 32896

SYNCB/PC Richards P.O. Box 960061 Orlando, FL 32896

Synchrony Bank P.O. Box 960061 Orlando, FL 32896-0061

Synchrony Bank/JCP P.O. Box 960090 Orlando, FL 32896

Synchrony Bank/TJX P.O. Box 965064 Orlando, FL 32896-0061

Synchrony Bank/Walmart P.O. Box 960061 Orlando, FL 32896-0061

Target Card Services P.O. Box 660170 Dallas, TX 75266

Teachers Fed Credit Union PO Box 9005 Smithtown, NY 11787

Toyota Motor Credit P.O. Box C22202 Owings Mills, MD 21117

Vivint Inc. 62992 Collection Drive Chicago, IL 60693-0629

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]
NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
2. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
CURRENT STATUS OF RELATED CASE:(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
3. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:

DEBTOR(S): Roxana Martinez

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(L	Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to	NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE SCHEDULE "A" OF RELATED CASE:	"A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
	who have had prior cases dismissed within the preceding 180 days may not ed to file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S AT	ΓORNEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New Yo	ork (Y/N): Y
I certify under penalty of perjury that the within bankruptcy as indicated elsewhere on this form. /s/ Adam C. Gomerman	y case is not related to any case now pending or pending at any time, except
Adam C. Gomerman Signature of Debtor's Attorney Law Offices of Adam C. Gomerman 807 East Jericho Turnpike	Signature of Pro Se Debtor/Petitioner
Huntington Station, NY 11746 631-549-1111 Fax:631-759-2925	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009